4	PATI	ENT APPLICA	ATION FE	EE DETERI	MINATION RE 2004	CORD		[n]	221.	a Wi
	CLAIMS AS FILED - PART I							44		27
	TOTAL CL	8144C	100	lumn 1)	(Column 2)	SM TY:	ALL EN		10	HER THAN
	TOTAL CLAIMS			_1		7 ~	ATE	FEE	· ~	ALLENTIT
- 1	FOR		NUN	BERFILED	NUMBER EXTRA			7/1	FIA	
	TOTAL CHARGEABLE CLAIMS		s í	minus 20=	•				OR BASIC	FEE
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	* If the differe	ence in column t	is less tha	ess than zero, enter "0" in column 2			80=	- 1	OR 1360	l=
			-	MENDED - PART II 9 + C			TAL		TOTA	ıı.
		(Column)		(Column 2) (Column b)			ALL ENT	· · · · ·	ОТН	ER THAN
	₹ .	CLAIMS REMAINING		HIGHE	ST	<u> </u>		001-	DA SMAL	LENTITY
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